## P1000070988

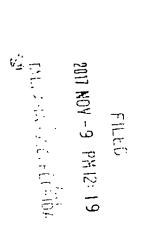
(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	<del>=</del> #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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C. GOLDFN NOV 1 3 2017

## **COVER LETTER**

TO: Amendment Section Division of Corporations

SUBJECT: Olga Grant, PA

Name of Corporation

DOCUMENT NUMBER: \$\frac{\hat{P}}{6000070988}\$

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Olga Grant

Name of Contact Person

Olga Grant, PA

Firm/Company

8300 SW 163rd street

Address

Palmetto Bay, FL 33157

City/State and Zip Code

olgavgrant@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Olga Grant

,603

374-3404

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:** 

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

•	•	617.0502, 607.1508, or 617.1508, Florida Statutes, this on organized under the laws of the State of Florida
in orde	r to change its registered office o	or registered agent, or both, in the State of Florida.
1. The name of t	the corporation: Olga Grant,	PA
2. The principal	office address: 8300 SW 16	3rd street, Palmetto Bay, FL 33157
3. The mailing a	ddress (if different): same as	above
4. Date of incorp	poration/qualification: 08/25/2	2016 Document number: P16000070988
	I street address of the current regitment of State: (If resigned, enter	istered agent and registered office on file with the resigned)
	Olga Grant	
	15 N Ocean dr, Key La	rgo, FL 33037
6. The name and (if changed):	I street address of the new registe	erred agent (if changed) and /or registered office
	Olga Grant	
		Palmetto Bay, FL 33157
The street address changed will	ess of its registered office and the be identical.	e street address of the business office of its registered agent.
Such change was authorized by the	as authorized by resolution duly be board, or the corporation has l	adopted by its board of directors or by an officer so been notified in writing of the change.
<u> </u>	rafi:	Olga Grant, President
I hereby accept I further agree of performance of agent. Or, if the	to comply with the provisions of my duties, and I am familiar wit	Printed or typed name and title  gent and agree to act in this capacity. all statutes relative to the proper and complete th and accept the obligation of my position as registered by to reflect a change in the registered office address, I  otified in writing of this change.
( light	V-	10/30/2017
Sign	nature of Registered Agent	Date
If signing on be	half of an entity:	
		_
T	yped or Printed Name	